



CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Box: Non-Fee Amendment
Commissioner for Patents
Washington, D.C. 20231**

on May 11, 2004.

Anne Antonoff
Anne Antonoff

RECEIVED

MAY 18 2004

Technology Center 2600

In Re Application of:

Jayant, et al.

Group Art Unit: 2613

Serial No.: 09/975,480

Examiner: An, Shawn S.

Filed: June 6, 2001

Docket No.: 062004-1770

For: **SYSTEM AND METHOD FOR OBJECT-ORIENTED VIDEO PROCESSING**

The following is a list of documents enclosed:

Amendment Transmittal Letter;
Amendment and Response to Non-Final Office Action; and
Return Postcard

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

O P E
MAY 16 2004
JC34
PATENT & TRADEMARK OFFICE

AMENDMENT TRANSMITTAL LETTER (SMALL)

Applicant(s): Jayant, et al.

Docket No.

62004-1770

Serial No.
09/875,480

Filing Date
June 6, 2001

Examiner
An, Shawn S.

Confirmation No.
7949

Group Art Unit
2613

Invention: SYSTEM AND METHOD FOR OBJECT-ORIENTED VIDEO PROCESSING

Commissioner for Patents
Mail Stop Non-Fee Amendment
P.O. Box 1450
Alexandria VA 22313-1450

RECEIVED

MAY 18 2004

Transmitted herewith is an amendment in the above-identified application.

Technology Center 2600

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	46 -	55 =	0	X \$9.00	\$0
INDEP. CLAIMS	8 -	8 =	0	X \$43.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$145.00
EXTENSION FEE	1 ST MONTH <input type="checkbox"/> 55.00	2 ND MONTH <input type="checkbox"/> 210.00	3 RD MONTH <input type="checkbox"/> 475.00	4 TH MONTH <input type="checkbox"/> 740.00	\$
Other Fees:					\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0

- No additional fee is required for the type of document.
 Please charge Deposit Account No. _____ in the amount of _____.
 A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed.
 A Credit Card Payment Form PTO-2038 is attached in the amount of \$ _____.
 The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778. A duplicate copy of this page is enclosed.


Scott A. Horstemeyer, Reg. No. 34,183

05/11/04
Date